

(LCN Connections Issue 12 – August 2014)

WHO ARE YOU & WHAT HAVE YOU DONE WITH MY HUSBAND?

*by Laurin Bellg, MD
LCN Leadership Council*



Eighteen years ago, a reclusive Midwestern dairy farmer had a heart transplant. He had contracted a viral illness that rendered his heart practically useless and he needed a new one. After being on the transplant list for several months, the call finally came. A young woman in her forties had lost her life to an asthma attack and her family graciously wanted to share her organs with those who needed them, so the farmer received her heart and a new personality.

Before the transplant this shy, retiring farmer had spent much of his time in the barn collecting milk and caring for his animals. He was a man of few words and kept his thoughts and emotions to himself. He never had any interest in television and shrunk from a crowd. Not exactly a social creature.

Shopping, as for most men of his generation and vocation, was not only uninteresting, it was torture. If he happened to be caught as the driver into town, he would sit on a bench in the front of the store while his wife and daughter looked through clothes and scoured the sale racks. If he was fortunate, another farmer chauffeur would also unwittingly be drafted into delivering his womenfolk to the town's only department store.

They would sit together commiserating their plight and swapping farming statistics while the ladies consulted seriously over this dress or that. If more than one farmer showed up, it could be quite festive as they talked feed prices and the right combination of silage for maximum yield.

But that was the extent of his social interaction, and aside from the occasional dinner after church at All Saints Lutheran, as close to a party as he would get.

After his heart transplant everything changed. His family could only stand back in wonder as this previously reclusive farmer completely transformed. The nature of the transformation left little doubt in his family's mind that it was more than renewed energy and health from a heart that actually worked. Or, as many transplant professionals would say, side effects of the antirejection medications.

Where before he felt that television was a waste of precious work time, suddenly he was watching soap operas and rearranging milking times around his favorites. He showed an instant devotion to cheese curls and soda which he would bring home by the bag full after returning from town where he had been shopping. Yes, shopping!

This gentle farmer who had never ventured beyond the cash registers of the small department store was suddenly bringing home bargains and was quite effusive about the sale racks. Even the thrifty farmer, he could appreciate a bargain.

Leaving housework to his wife and daughter before surgery, after he received his new heart he became not only interested but actively engaged in cleaning out cupboards, rearranging closets and folding the laundry "just so". In fact, he was now known to refold clothes his wife had just finished if the outcome was not to his liking. Fortunately, he married a woman of good humor.

Before his transplant he was a man of few words and very sparse with his emotional expression. Now he was jovial, social and quick to tears if he heard a moving story or saw a Hallmark movie, for which he now bought a TV Guide to make sure he didn't miss one.

The change was so dramatic and different from the personality he'd brought into this life that his family began to wonder about the personality of the donor.

Though they have no information other than her cause of death, they imagined her as a hard-working neat freak with a penchant for soap operas and cheese curls who teared up when she heard a sweet story or saw a moving chick flick. She probably enjoyed shopping, especially when she could land a bargain, and loved a good party.

The change in the farmer's personality was so remarkable that it is hard to dismiss it as a side effect of immunosuppression drugs or rejuvenated health after a previously failing heart. In fact, now almost two decades later, down to only a tiny dose of prednisone to prevent organ rejection, the dramatic personality changes live on.

I'd read accounts of recipient patients taking on the characteristics of the donor and even subscribed to the theory that it was the result of cellular memory. But what intrigued me most is that I had admitted this man to the hospital because of an asthma exacerbation, recalling that his donor had died of an asthma attack.

Never a smoker and not plagued by medical problems prior to his transplant, over the ensuing years he developed twitchy airways that had now resulted in two recent hospital admissions and had him reaching for his wife's inhaler for relief.

Granted, over time skin is not the only thing that loses tone and certainly we see some patients with an inherent vulnerability who develop asthma symptoms as they age. But the irony made it difficult for me to be dismissive.

Cheese curls, soap operas, bargain hunting and asthma. Was that new heart just sitting there benignly in his chest keeping the physical facility functional, or was it actively communicating and integrating with its new host? It's hard for me to accept that the richly encoded DNA of a donor would remain quiescent, keeping all of the complex personal history of its previous owner to itself.

Hard core clinicians maintain that there is no solid evidence or clinical findings to support that cellular memory exists. Try telling that to a now outgoing Wisconsin dairy farmer who reads the sale papers like he used to review the farm report.